PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10796371

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			20		COIL	(COIGHIN E)				OR 1		
								RATE	FEE	-	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			1/1/2 minus 20=		* 6			X\$ _. 9=		OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =		* 8			X43=		OR	X86=	
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+145=		OR	+290=	
* If	the difference	in column 1 is	ess than zero, enter "0" in o			column 2		TOTAL		OR	TOTAL	770.
CLAIMS AS AMENDED - PART II								•		å .	OTHER THAN	
		(Column 1)	(Column 2)			(Column 3)	_	SMALL E	ENTITY	OR .	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF MI	JETIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)	_					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	·.	= .		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .	İ	X43=		OR	X86=	
9	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											
								+145=		OR	+290=	
								TOTAL DDIT, FEE		OR ,	TOTAL ODIT. FEE	···-··
		(Column 1)		(Colum		(Column 3)	i			•		·
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	ļ.	OR	X\$18=	
	Independent	*	Minus	***		=		X43=		OR	X86=	
`	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									1		
* 1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.]	OR	+290=	
** !	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR	TOTAL DDIT. FEE	
		iber Previously Paid					r foun	d in the appr	opriate box	in colu	ımn 1.	